Based on Spending Breakdown by Claim

Hospital Name	Provider Number	State
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM

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Period	Claim Type
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility

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AHS_SPP Based on Spending Breakdown by Claim

Avg Spending Per Episode (Hospital)	Avg Spending Per Episode (State)	Avg Spending Per Episode (Nation)
\$13.00	\$11.00	\$14.00
\$1.00	\$0.00	\$1.00
\$12.00	\$10.00	\$5.00
\$200.00	\$98.00	\$68.00
\$2.00	\$2.00	\$3.00
\$10.00	\$8.00	\$9.00
\$277.00	\$158.00	\$152.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$10224.00	\$8054.00	\$8294.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$30.00	\$32.00	\$24.00
\$2356.00	\$1563.00	\$1804.00
\$560.00	\$644.00	\$696.00
\$229.00	\$139.00	\$110.00
\$2640.00	\$2495.00	\$2493.00
\$553.00	\$604.00	\$602.00
\$2499.00	\$2340.00	\$3012.00

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Based on Spending Breakdown by Claim

Percent of Spending (Hospital)	Percent of Spending (State)
0.06%	0.07%
0%	0%
0.06%	0.06%
0.97%	0.58%
0.01%	0.01%
0.05%	0.05%
1.34%	0.93%
0%	0%
0%	0%
49.63%	47.25%
0%	0%
0%	0%
0.15%	0.19%
11.44%	9.17%
2.72%	3.78%
1.11%	0.82%
12.82%	14.64%
2.68%	3.55%
12.13%	13.73%

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Based on Spending Breakdown by Claim

Percent of Spending	(Nation)
	0.07%
	0%
	0.03%
	0.37%
	0.02%
	0.05%
L	0.83%
	0%
	0%
	45.18%
	0%
	0%
	0.13%
	9.83%
	3.79%
l	0.6%
	13.58%
•	3.28%
	16.4%

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Based on Spending Breakdown by Claim

LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE MEDICAL CENTER	320009	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility

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Based on Spending Breakdown by Claim

\$108.00	\$104.00	\$108.00
\$963.00	\$783.00	\$889.00
\$18358.00	\$17044.00	\$20601.00
\$14.00	\$11.00	\$0.00
\$1.00	\$0.00	\$2.00
\$5.00	\$10.00	\$0.00
\$68.00	\$98.00	\$51.00
\$3.00	\$2.00	\$0.00
\$9.00	\$8.00	\$2.00
\$152.00	\$158.00	\$140.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$8294.00	\$8054.00	\$7074.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$24.00	\$32.00	\$15.00
\$1804.00	\$1563.00	\$1392.00
\$696.00	\$644.00	\$591.00
\$110.00	\$139.00	\$212.00
\$2493.00	\$2495.00	\$2069.00
\$602.00	\$604.00	\$367.00
\$3012.00	\$2340.00	\$1735.00

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Based on Spending Breakdown by Claim

	0.53%	0.61%
	4.31%	4.59%
	100%	100%
	0%	0.07%
	0.01%	0%
	0%	0.06%
	0.35%	0.58%
	0%	0.01%
	0.02%	0.05%
	0.97%	0.93%
	0%	0%
	0%	0%
	49.2%	47.25%
	0%	0%
	0%	0%
	0.11%	0.19%
	9.68%	9.17%
	4.11%	3.78%
•	1.48%	0.82%
	14.39%	14.64%
	2.55%	3.55%
	12.07%	13.73%

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Based on Spending Breakdown by Claim

	0.59%
•	5.25%
	100%
	0.07%
	0%
	0.03%
	0.37%
	0.02%
	0.05%
I	0.83%
	0%
	0%
	45.18%
	0%
	0%
	0.13%
	9.83%
•	3.79%
	0.6%
	13.58%
•	3.28%
	16.4%

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LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
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LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM

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1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient

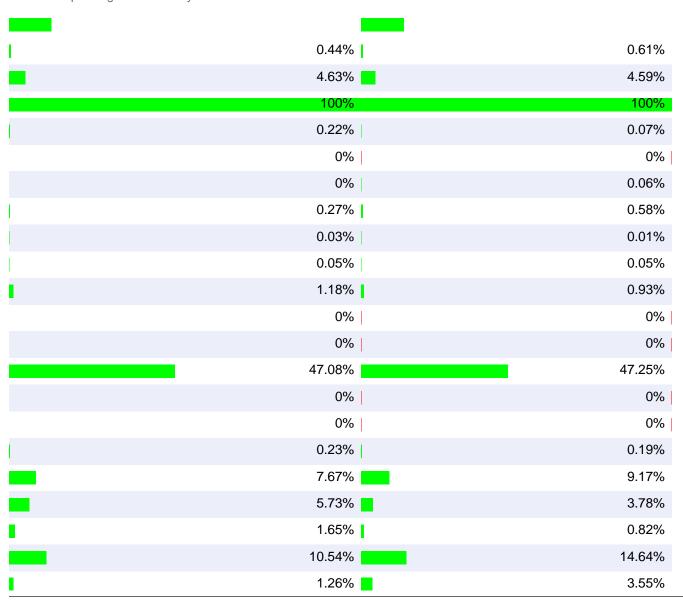
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\$63.00	\$104.00	\$108.00
\$665.00	\$783.00	\$963.00
\$14378.00	\$17044.00	\$18358.00
\$36.00	\$11.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$10.00	\$5.00
\$44.00	\$98.00	\$68.00
\$6.00	\$2.00	\$3.00
\$9.00	\$8.00	\$9.00
\$193.00	\$158.00	\$152.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$7680.00	\$8054.00	\$8294.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$37.00	\$32.00	\$24.00
\$1251.00	\$1563.00	\$1804.00
\$934.00	\$644.00	\$696.00
\$269.00	\$139.00	\$110.00
\$1719.00	\$2495.00	\$2493.00
\$205.00	\$604.00	\$602.00

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

I	0.59%
	5.25%
	100%
	0.07%
	0%
	0.03%
I	0.37%
	0.02%
1	0.05%
I	0.83%
	0%
	0%
	45.18%
	0%
	0%
	0.13%
	9.83%
	3.79%
I	0.6%
	13.58%
	3.28%

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LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM

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1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient

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\$3247.00	\$2340.00	\$3012.00
\$76.00	\$104.00	\$108.00
\$608.00	\$783.00	\$963.00
\$16314.00	\$17044.00	\$18358.00
\$55.00	\$11.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$10.00	\$5.00
\$51.00	\$98.00	\$68.00
\$6.00	\$2.00	\$3.00
\$6.00	\$8.00	\$9.00
\$73.00	\$158.00	\$152.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$7363.00	\$8054.00	\$8294.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$25.00	\$32.00	\$24.00
\$1346.00	\$1563.00	\$1804.00
\$986.00	\$644.00	\$696.00
\$45.00	\$139.00	\$110.00
\$1539.00	\$2495.00	\$2493.00

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Based on Spending Breakdown by Claim

I .		
	19.9%	13.73%
	0.46%	0.61%
	3.73%	4.59%
	100%	100%
I	0.35%	0.07%
	0%	0%
	0%	0.06%
l	0.32%	0.58%
	0.04%	0.01%
	0.04%	0.05%
l .	0.46%	0.93%
	0%	0%
	0%	0%
	46.48%	47.25%
	0%	0%
	0%	0%
I	0.16%	0.19%
	8.5%	9.17%
	6.22%	3.78%
l	0.29%	0.82%
	9.72%	14.64%

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Based on Spending Breakdown by Claim

	16.4%
I	0.59%
	5.25%
	100%
	0.07%
	0%
	0.03%
I	0.37%
	0.02%
	0.05%
I	0.83%
	0%
	0%
	45.18%
	0%
	0%
	0.13%
_	9.83%
	3.79%
I	0.6%
	13.58%

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LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
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HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK

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1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice

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)0	\$602.	\$604.00	\$498.00
00	\$3012.	\$2340.00	\$3122.00
)0	\$108.	\$104.00	\$81.00
00	\$963.	\$783.00	\$645.00
)0	\$18358 .	\$17044.00	\$15841.00
00	\$14.	\$22.00	\$14.00
)0	\$1.	\$2.00	\$5.00
00	\$5.	\$7.00	\$12.00
)0	\$68.	\$87.00	\$42.00
00	\$3.	\$2.00	\$2.00
)0	\$9.	\$9.00	\$13.00
00	\$152 .	\$129.00	\$141.00
)0	\$0.	\$0.00	\$0.00
00	\$0.	\$0.00	\$0.00
)0	\$8294.	\$8133.00	\$9595.00
00	\$0.	\$0.00	\$0.00
)0	\$0.	\$0.00	\$0.00
00	\$24.	\$33.00	\$82.00
)0	\$1804.·	\$1492.00	\$2014.00
00	\$696.	\$792.00	\$706.00
)0	\$110.	\$138.00	\$118.00

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Based on Spending Breakdown by Claim

3.14%	3.55%
19.71%	13.73%
0.51%	0.61%
4.07%	4.59%
100%	100%
0.08%	0.13%
0.03%	0.01%
0.06%	0.04%
0.23%	0.51%
0.01%	0.01%
0.07%	0.06%
0.76%	0.76%
0%	0%
0%	0%
52.05%	47.62%
0%	0%
0%	0%
0.44%	0.19%
10.92%	8.74%
3.83%	4.64%
0.64%	0.81%

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Based on Spending Breakdown by Claim

	3.28%
	16.4%
I	0.59%
•	5.25%
	100%
	0.07%
	0%
	0.03%
I	0.37%
	0.02%
	0.05%
I	0.83%
	0%
	0%
	45.18%
	0%
	0%
	0.13%
	9.83%
•	3.79%
l	0.6%

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HILLCREST MEDICAL CENTER	370001	ОК
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST MEDICAL CENTER	370001	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK

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1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency

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\$2789.00	\$2779.00	\$2493.00
\$644.00	\$556.00	\$602.00
\$1279.00	\$2021.00	\$3012.00
\$125.00	\$111.00	\$108.00
\$851.00	\$765.00	\$963.00
\$18432.00	\$17081.00	\$18358.00
\$0.00	\$22.00	\$14.00
\$5.00	\$2.00	\$1.00
\$0.00	\$7.00	\$5.00
\$13.00	\$87.00	\$68.00
\$0.00	\$2.00	\$3.00
\$4.00	\$9.00	\$9.00
\$99.00	\$129.00	\$152.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$5738.00	\$8133.00	\$8294.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$18.00	\$33.00	\$24.00
\$1069.00	\$1492.00	\$1804.00
\$783.00	\$792.00	\$696.00

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Based on Spending Breakdown by Claim

1	I
15.13%	16.27%
3.49%	3.26%
6.94%	11.83%
0.68%	0.65%
4.62%	4.48%
100%	100%
0%	0.13%
0.03%	0.01%
0%	0.04%
0.1%	0.51%
0%	0.01%
0.03%	0.06%
0.76%	0.76%
0%	0%
0%	0%
43.77%	47.62%
0%	0%
0%	0%
0.14%	0.19%
8.16%	8.74%
5.98%	4.64%

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Based on Spending Breakdown by Claim

I	
	13.58%
	3.28%
	16.4%
I	0.59%
	5.25%
	100%
	0.07%
	0%
	0.03%
Ĭ	0.37%
	0.02%
	0.05%
I	0.83%
	0%
	0%
	45.18%
	0%
	0%
	0.13%
	9.83%
	3.79%

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HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK

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1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier

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\$226.00	\$138.00	\$110.00
\$2504.00	\$2779.00	\$2493.00
\$333.00	\$556.00	\$602.00
\$1462.00	\$2021.00	\$3012.00
\$88.00	\$111.00	\$108.00
\$766.00	\$765.00	\$963.00
\$13108.00	\$17081.00	\$18358.00
\$0.00	\$22.00	\$14.00
\$6.00	\$2.00	\$1.00
\$0.00	\$7.00	\$5.00
\$22.00	\$87.00	\$68.00
\$6.00	\$2.00	\$3.00
\$7.00	\$9.00	\$9.00
\$85.00	\$129.00	\$152.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$5579.00	\$8133.00	\$8294.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$19.00	\$33.00	\$24.00
\$842.00	\$1492.00	\$1804.00

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Based on Spending Breakdown by Claim

	<u> </u>	
1	1.72%	0.81%
	19.1%	16.27%
	2.54%	3.26%
	11.15%	11.83%
I	0.67%	0.65%
	5.85%	4.48%
	100%	100%
	0%	0.13%
	0.05%	0.01%
	0%	0.04%
	0.18%	0.51%
	0.05%	0.01%
	0.06%	0.06%
	0.71%	0.76%
	0%	0%
	0%	0%
	46.5%	47.62%
	0%	0%
	0%	0%
	0.16%	0.19%
	7.02%	8.74%

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Based on Spending Breakdown by Claim

I	0.6%
	13.58%
	3.28%
	16.4%
I	0.59%
	5.25%
	100%
	0.07%
	0%
	0.03%
1	0.37%
	0.02%
	0.05%
I	0.83%
	0%
	0%
	45.18%
	0%
	0%
	0.13%
	9.83%

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HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL CUSHING	370099	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK

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1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment

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\$502.00	\$792.00	\$696.00
\$202.00	\$138.00	\$110.00
\$1964.00	\$2779.00	\$2493.00
\$472.00	\$556.00	\$602.00
\$1499.00	\$2021.00	\$3012.00
\$93.00	\$111.00	\$108.00
\$699.00	\$765.00	\$963.00
\$11998.00	\$17081.00	\$18358.00
\$7.00	\$22.00	\$14.00
\$3.00	\$2.00	\$1.00
\$12.00	\$7.00	\$5.00
\$40.00	\$87.00	\$68.00
\$0.00	\$2.00	\$3.00
\$31.00	\$9.00	\$9.00
\$70.00	\$129.00	\$152.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$5793.00	\$8133.00	\$8294.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$7.00	\$33.00	\$24.00

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Based on Spending Breakdown by Claim

	4.18%	4.64%
	1.69%	0.81%
	16.37%	16.27%
	3.93%	3.26%
	12.5%	11.83%
I	0.77%	0.65%
	5.83%	4.48%
	100%	100%
	0.06%	0.13%
	0.02%	0.01%
	0.1%	0.04%
	0.35%	0.51%
	0%	0.01%
	0.27%	0.06%
I	0.61%	0.76%
	0%	0%
	0%	0%
	50.55%	47.62%
	0%	0%
	0%	0%
	0.06%	0.19%

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Based on Spending Breakdown by Claim

	3.79%
I	0.6%
	13.58%
	3.28%
	16.4%
I	0.59%
	5.25%
	100%
	0.07%
	0%
	0.03%
l	0.37%
	0.02%
	0.05%
L	0.83%
	0%
	0%
	45.18%
	0%
	0%
	0.13%

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HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK

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During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility

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\$835.00	\$1492.00	\$1804.00
\$592.00	\$792.00	\$696.00
\$58.00	\$138.00	\$110.00
\$1787.00	\$2779.00	\$2493.00
\$642.00	\$556.00	\$602.00
\$914.00	\$2021.00	\$3012.00
\$70.00	\$111.00	\$108.00
\$601.00	\$765.00	\$963.00
\$11462.00	\$17081.00	\$18358.00
\$51.00	\$22.00	\$14.00
\$0.00	\$2.00	\$1.00
\$0.00	\$7.00	\$5.00
\$41.00	\$87.00	\$68.00
\$0.00	\$2.00	\$3.00
\$7.00	\$9.00	\$9.00
\$201.00	\$129.00	\$152.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$6512.00	\$8133.00	\$8294.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00

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Based on Spending Breakdown by Claim

	1
7.	28% 8.74%
5.	16% 4.64%
0.	51% 0.81%
15.	59% 16.27%
	5.6% 3.26%
7.	97% 11.83%
0.	61% 0.65%
5.	24% 4.48%
1	00% 100%
0.	38% 0.13%
	0% 0.01%
	0% 0.04%
0.	31% 0.51%
	0% 0.01%
0.	0.06%
1.	49% 0.76%
	0%
	0%
48.	39% 47.62%
	0%
	0%

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Based on Spending Breakdown by Claim

	9.83%
	3.79%
I	0.6%
	13.58%
	3.28%
	16.4%
1	0.59%
	5.25%
	100%
	0.07%
	0%
	0.03%
1	0.37%
	0.02%
	0.05%
I	0.83%
	0%
	0%
	45.18%
	0%
	0%

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BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM-	450231	TX

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During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier

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\$33.00	\$33.00	\$24.00
\$1046.00	\$1492.00	\$1804.00
\$892.00	\$792.00	\$696.00
\$389.00	\$138.00	\$110.00
\$1011.00	\$2779.00	\$2493.00
\$378.00	\$556.00	\$602.00
\$2164.00	\$2021.00	\$3012.00
\$64.00	\$111.00	\$108.00
\$668.00	\$765.00	\$963.00
\$13459.00	\$17081.00	\$18358.00
\$17.00	\$25.00	\$14.00
\$0.00	\$2.00	\$1.00
\$1.00	\$6.00	\$5.00
\$157.00	\$82.00	\$68.00
\$3.00	\$3.00	\$3.00
\$7.00	\$10.00	\$9.00
\$108.00	\$171.00	\$152.00

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Based on Spending Breakdown by Claim

I	0.25%	0.19%
	7.77%	8.74%
	6.62%	4.64%
	2.89%	0.81%
	7.51%	16.27%
	2.81%	3.26%
	16.08%	11.83%
I	0.48%	0.65%
<u> </u>	4.97%	4.48%
	100%	100%
	0.09%	0.13%
	0.09%	0.13%
	0.09%	0.13%
	0.09% 0% 0.01%	0.13% 0.01% 0.03%
	0.09% 0% 0.01% 0.79%	0.13% 0.01% 0.03% 0.42%

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Based on Spending Breakdown by Claim

	0.13%
	9.83%
	3.79%
I	0.6%
	13.58%
	3.28%
	16.4%
ļ	0.59%
	5.25%
	100%
	0.07%
	0%
	0.03%
	0.37%
	0.02%
	0.05%
I	0.83%
•	

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Based on Spending Breakdown by Claim

RΔ	DТ	ICT	CAI	MD	119
DA	$ \cdot$	เอเ	CA	יחועו	U.O

BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM-	450231	TX

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During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospi	Home Health Agency
1 through 30 days After Discharge from Index Hospi	Hospice
1 through 30 days After Discharge from Index Hospi	Inpatient
1 through 30 days After Discharge from Index Hospi	Outpatient
1 through 30 days After Discharge from Index Hospi	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospi	Durable Medical Equipment

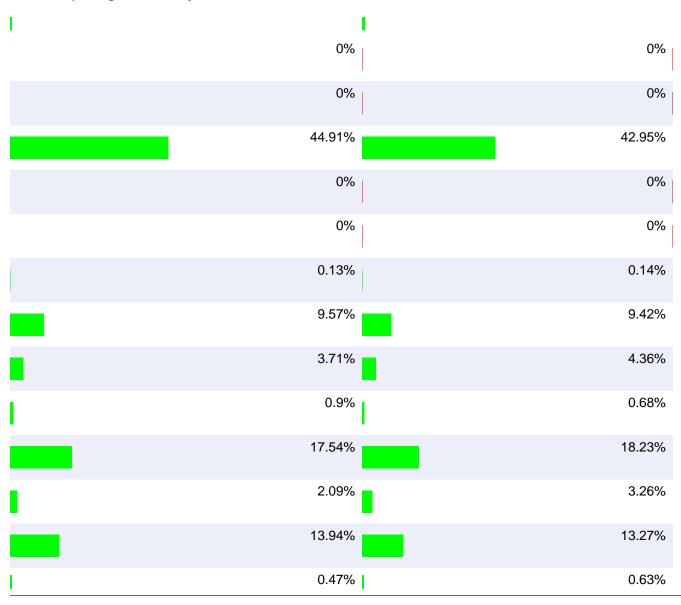
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\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$8884.00	\$8491.00	\$8294.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$26.00	\$28.00	\$24.00
\$1892.00	\$1861.00	\$1804.00
\$734.00	\$862.00	\$696.00
\$178.00	\$134.00	\$110.00
\$3470.00	\$3605.00	\$2493.00
\$413.00	\$644.00	\$602.00
\$2757.00	\$2624.00	\$3012.00
\$94.00	\$125.00	\$108.00

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

0% 0% 45.18% 0% 0% 0.13% 9.83% 3.79% 0.6% 13.58% 3.28% 16.4% 0.59%

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Based on Spending Breakdown by Claim

BAP	TIST.	CAN	ИΡΙ	JS

BAPTIST ST ANTHONYS HEALTH SYSTEM-	450231	TX
BAPTIST CAMPUS		
BAPTIST ST ANTHONYS HEALTH SYSTEM-	450231	TX
BAPTIST CAMPUS		

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1 through 30 days After Discharge from Index Hospi	Carrier
Complete Episode	Total

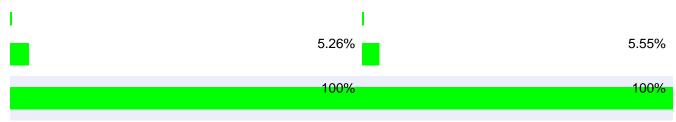
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\$	31040.00	\$1097.00	\$963.00
\$1	9780.00	\$19768.00	\$18358.00

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Based on Spending Breakdown by Claim



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AHS_SPP Based on Spending Breakdown by Claim

5.25%

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